TO PROMOTE CONTINUOUS IMPROVEMENT IN THE QUALITY AND EFFICIENCY OF HEALTHCARE MANAGEMENT THROUGH PROCESSES OF ACCREDITATION, EDUCATION, AND MEASUREMENT.

2018 YEAR IN REVIEW

Setting the Standard.
Transforming Healthcare.
An independent, nonprofit accreditation organization based in Washington, D.C., URAC’s mission is to advance healthcare quality through leadership, accreditation, measurement and innovation.

URAC was founded in 1990 as an independent, third party healthcare quality validator. Our Board of Directors is specifically designed to ensure diverse representation from throughout the healthcare industry. This experience working with disparate stakeholders is invaluable in today’s changing healthcare environment. To be successful, stakeholders across the healthcare industry must work together to control costs, raise quality, and improve overall health outcomes.
2018 marked a year of transition for URAC, as our president and CEO and long-time board member, Kylanne Green, announced her retirement. Ms. Green continued to lead the organization through the end of January 2019, while the Board of Directors commenced a nationwide search.

Based on that search, I became the first physician President and CEO in the history of URAC, taking the helm in February 2019. I joined the organization from Premier, Inc. where I was the Vice President for Clinical Performance Improvement and Applied Analytics. I’m known for my work in population health, quality improvement, network development, CIN’s, ACO’s, physician alignment, and incentive design.

2018 saw URAC achieve a landmark legal precedent for rigorous healthcare accreditation. URAC was sued by an organization after having its accreditation revoked based on the determination that the organization did not maintain required data integrity, compliance with applicable laws and regulations and quality standards. The United States District Court Decision supported the fact that URAC’s determinations in the appeal process “were the product of reasoned decision-making and a fair process.”

Financially, 2018 saw stable financial performance and above targeted performance on reaccreditations. Measures reporting continues to grow as more organizations become eligible. In 2018, 298 accredited organizations submitted measures to meet accreditation requirements. Programs with measures reporting in 2018 were Health Plan, Health Plan with Health Insurance Marketplace, Pharmacy Benefit Management, Specialty Pharmacy, Drug Therapy Management, Mail Service Pharmacy, Case Management, Disease Management and Wellness.

Continuing our efforts to strengthen the brand, increase engagement and position URAC as a thought leader across the healthcare industry, we launched the completely re-imagined website in February 2018 – a website that focuses on providing relevant, useful information to our audiences in the form of articles, publications, webinars, videos and news. We also launched the Telemed Leadership Forum in March 2018 – our inaugural telehealth conference that brought together healthcare leaders from across the country to share their knowledge and insights on their organizations’ telehealth successes.

With the rapidly changing healthcare environment leveraging emerging technology and new care options, safety and quality is more important than ever. URAC will continue to evolve to ensure the safety and quality of healthcare, as the industry continues to innovate.

Shawn Griffin, M.D.
WHAT WE BELIEVE

- The patient is at the center of everything we do
- The provider’s voice must be heard
- The best approach to care delivery is through physician-led teams
- Healthcare solutions must be local to be sustainable
- Continuous improvement is achieved through performance measurement
WHAT WE DO

URAC uses evidence-based measures and develops standards through inclusive engagement with a broad range of stakeholders committed to improving the quality of healthcare. This process results in standards that promote industry best practices, encourage quality improvement, and protect and empower consumers. URAC ensures the quality of its programs and services through continuous improvement according to Lean and Six Sigma principles.

Our approach to the accreditation process facilitates learning in the client organization. Rather than simply checking off a list of requirements, the organization going through our accreditation process is creating a framework for continuous improvement. While URAC sets the standards, we do not dictate how they are achieved. This approach supports and stimulates local innovation. This is the real value in achieving the URAC accreditation seal.

The value of achieving the URAC seal is in the approach – and what your organization achieves by going through the process.
The biggest news in 2018 was President and CEO Kylanne Green’s retirement announcement. The Board of Directors commenced a nationwide search for our new president and CEO, and recruited Shawn Griffin, M.D., the first physician in URAC’s history to fill this role. Dr. Griffin started with URAC on February 6, 2019. In 2018, URAC hired 13 new employees, include three new sales professionals, two accreditation staff and one hourly staff. Five individuals were promoted in 2018. URAC continues to encourage and invest in staff education and professional development. Two URAC employees completed certification preparation courses and successfully renewed their certifications. Four employees are studying for their professional certification exams.
A BREAKTHROUGH YEAR FOR URAC

In 2018, we:

• Exceeded targets for reaccreditation
• Issued 220 full accreditations, 216 reaccreditations and 3 certifications
• Won a landmark court case, in which URAC’s right to deny accreditation to an applicant was challenged in Federal District Court. The court ruling in URAC’s favor also provides protection for other accreditors that provide a rigorous process.
• Revised the Medicare Advantage accreditation standards, and received the CMS proposed notice of approval of URAC’s application for deeming authority.
• Received new recognition in rule or statute in 2018 in the following states and agencies:
  ▶ State of Alaska requires URAC IRO accreditation for external reviews
  ▶ State of Indiana requires URAC accreditation for drug utilization review in workers’ compensation
  ▶ State of Florida Medicaid renewed URAC’s Health Plan Accreditation deemed status

Financial performance remained stable, with a strong operating margin and the highest total revenue in URAC’s history.
URAC participated on nine technical expert panels including:

- CMS/Booz Allen Hamilton QRS Technical Expert Panel
- CMS/Booz Allen Hamilton QIP Technical Expert Panel
- CMS/ImPAQ QRS Measure Development Technical Expert Panel
- National Quality Forum (NQF) Scientific Methods Panel
- Pharmacy Quality Alliance (PQA)

Measure Validation Panel
- NQF: National Quality Partners Leadership Consortium
- PQA Measure Update Panel
- PQA Measures Advisement Group Panel
- Primary Care Shared Principles Steering Committee
URAC staff participated as speakers or panelists at the following events in 2018:

- An Outsider’s Perspective from the Inside (Kylanne Green at Asembia’s Specialty Pharmacy Summit 2018, May 2018)

- URAC Specialty Pharmacy Accreditation: Advice from the Review Team (Heather Bonome and Jennifer Richards at Asembia’s Specialty Pharmacy Summit 2018, May 2018)

- Dispensing Accuracy of Specialty Pharmacies (Marybeth Farquhar at Pharmacy Quality Alliance 2018 Annual Meeting, May 2018)

- Why Telehealth Accreditation? Advancing Healthcare Quality Through National Standards (Deborah Smith, Innovation Theatre session at the Becker’s Hospital Review Annual Health IT + Revenue Cycle Conference, September 2018)

- Update on URAC Standards and Polling on Programs (Donna Merrick at the 2018 NAIRO Navigating the Changes in Healthcare conference, October 2018)

- URAC Accreditation: Polling Results and Program Ideas (Deborah Smith at the 2018 NAIRO Navigating the Changes in Healthcare conference, October 2018)

- URAC Overview and Credentials Verification Organization Accreditation (Karen Watts at the DC Association Medical Staff Services Conference, November 2018)
The new website was launched in February 2018 with the goals of: providing an easy-to-navigate, visually compelling experience for users; positioning URAC as a thought leader and as a resource for accurate, reliable information on topics that matter to our audiences; and increasing engagement. After a full year, the results are in:

- Percentage of new visitors rose to 84.9% from 82.7%
- Quality of sessions also rose, based on the increase in session duration and decrease in bounce rates: session duration rose 9.24%; bounce rate decreased by 8.17%.
- Visits from social media increased by 138%, bounce rates decreased by 17.6% and session duration increased by 67%.
- Social media conversions increased by 8,317%.
THE URAC REPORT

- **68** articles published in The URAC Report
- **18,714** total page views of our blog articles (25% increase)
- **1,619** subscribers (15% increase)

One whiteboard animated video:
  - How Accreditation Benefits Clinically Integrated Networks

Two infographics:
  - The Current State of Telehealth
  - Challenges and Success Factors of Telehealth
We continue to add to our growing library of informative Industry Insight Reports, which are located on the Publications section of Insights and Ideas on urac.org. In 2018, we published four new reports:

• Accelerating Telehealth Adoption: Telemedicine’s Role in the Volume to Value Journey
• Deep Dive: Challenges, Successes and Outlook of Three Clinically Integrated Networks
• Retail Community Pharmacies: Adapting and Innovating to Succeed in a Turbulent Marketplace
• Leading the Way: Success Stories of Three Telehealth Innovators
Both Twitter accounts, @urac and @TelemedLeaders, saw a combined 27 percent increase in 2018
- 2,318 followers on @URAC
- 657 followers on @TelemedLeaders
- Published posts increased by nearly 4 percent
- Our Twitter accounts received 21,893 clicks and 3,308 interactions

Facebook followers increased by less than 1 percent in 2018, to 1,901 followers
- Published posts decreased by 24 percent
- We had 394 clicks and 37 interactions on the URAC Facebook page.

LinkedIn followers increased by almost 16 percent, to 3,665 followers
- Published posts increased by 24 percent
- We received 1,690 clicks (a 69 percent increase); 1,048 interactions (nearly 8 percent increase)
For the first time ever, URAC live streamed the accreditation standards workshops, giving clients who are unable to travel the opportunity to participate. Presented by URAC reviewers, these workshops take a deep dive into the standards and allow participants to interact with their peers and ask questions directly to presenters.

We held four accreditation standards workshops on March 1 and 2 at the Renaissance Washington, DC. We held the first workshop on measures on October 9, “Mastering Healthcare Quality Performance Measures,” followed by three accreditation standards workshops held concurrently.

Total attendance for the March workshops came to 178 in-person, 117 live-streaming. For the October workshops, total attendance came to 59 in-person, 67 live-streaming.
URAC's first Telemed Leadership Forum, March 27-29 at the Renaissance Washington, DC, attracted 100 attendees from hospitals and health systems, provider groups and telehealth providers. A total of 34 telehealth leaders participated on panel discussions or presented sessions.

Hosting the Telemed Leadership Forum and bringing together these telehealth experts from hospitals and health systems, payers, and providers, aligns with URAC's mission to advance the quality of healthcare. It also builds brand awareness for URAC and helps position URAC as a thought leader in the healthcare marketplace.
Learn more about URAC’s accreditation and certification programs at www.urac.org.

Let’s talk. Call us at 202-326-3943 or send an email to businessdevelopment@urac.org.